Edgar Filing: SHAPIRO BARRY I - Form 4

SHAPIRO B.	ARRY I											
Form 4												
June 22, 2006	5											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
	UNITE	D STATES		ITIES Al hington,			NGE	COMMISSION	OMB Number:	3235-0287		
Check this box									Expires:	January 31,		
subject to statement of changes if no longer subject to statement of changes in the statement of the stateme				GES IN BENEFICIAL OWNE				NERSHIP OF		2005		
Section 10		SECURITIES								Estimated average burden hours per		
Form 4 or									response 0.5			
Form 5	Filed p	ursuant to	Section 16	b(a) of the	e Securiti	es Ez	kchang	ge Act of 1934,	·			
obligation may conti		7(a) of the	Public Ut	ility Hold	ing Com	pany	Act o	of 1935 or Sectio	n			
See Instru		30(h)) of the Inv	vestment	Company	y Act	of 19	40				
1(b).	•••••											
(Print or Type R	esponses)											
	ddress of Reportir	ng Person [*]	2. Issuer	. Issuer Name and Ticker or Trading mbol				5. Relationship of Reporting Person(s) to				
SHAPIRO B	SARRY I		Symbol					Issuer				
CHICO				HICOS FAS INC [CHS]				(Che)	ck all applicable	a)		
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	insaction			(Chee	ck all application			
			(Month/Da	onth/Day/Year)				Director	10%	6 Owner		
				6/20/2006				XOfficer (give titleOther (specify below) below) SVP- Operations				
									-			
				Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mon				lonth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
FT. MYERS	EL 33012								More than One Re			
$\Gamma 1. W 1 EKS$, I'L 33912							Person				
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction E	Date 2A. De	emed					5. Amount of	6. Ownership			
Security	(Month/Day/Ye		on Date, if TransactionAcquired (A) or					Securities	(D) or Benef	Indirect		
(Instr. 3)		any (Month	/Day/Vear)	Code Disposed of (D) Day(Vaar) (Instr. 8) (Instr. 3.4 and 5)				Beneficially Owned		Beneficial Ownership		
(Month/Day/Y			/Day/Teal)	y/Year) (Instr. 8) (Instr. 3, 4 and 5)				Following	· · /	(Instr. 4)		
						(•)		Reported				
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	06/20/2000				3,000			17 110	D			
Stock	06/20/2006			А	(1)	А	\$0	17,119	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber of) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code Y	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SHAPIRO BARRY I 11215 METRO PARKWAY FT. MYERS, FL 33912			SVP- Operations					
Signatures								
Michael J. Kincaid, Attorney in Fact		06/22/2000						
**Signature of Reporting Person		Date						

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Restricted stock grant which vests 1/3 each year beginning on 6/20/07

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.